

P166. The preventive strategy of cervical incompetency

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Context: Preterm birth (PB) is the single biggest cause of neonatal mortality and morbidity in the world. The cervical incompetency (CI) is one of the most important risk factor for preterm birth, has emerged as one of the strongest predictors of preterm birth in asymptomatic women.

Objective: To evaluate the efficacy of cervical pessary (CP) placement in preventing preterm birth in asymptomatic women with a singleton pregnancy.

Methods: In order to prevent preterm births, 248 pregnant women with CI (anamnestic and sonographic data) with singleton pregnancy in 14-20 gestational weeks were carried out the installation of a CP Simurg. As clinical outcomes we assessed amount of PB, perinatal losses, cases of intrauterine infection, corticosteroid treatment for fetal maturation, and admission to neonatal intensive care unit.

Results: Our investigation delineated the clinical effectiveness of CPs Simurg in reducing the incidence of late miscarriages, premature birth (1,2%) and premature rupture of membranes (8.1%). There were also a decrease in the frequency of admissions for tocolytics treatment (12,5%) and corticosteroid treatment (10,5%). At the same time there were no amounts of intrauterine infection cases. Among minor side effects in 66.9% of pregnant women, there were increases in non-microbial vaginal discharge, which did not bring significant discomfort to women and did not require removal of the CPs Simurg.

Conclusion: Use of the cervical pessary had the positive effects in preventing preterm birth in asymptomatic singleton pregnancy women diagnosed with cervical incompetency.

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